

## The Housing First Model

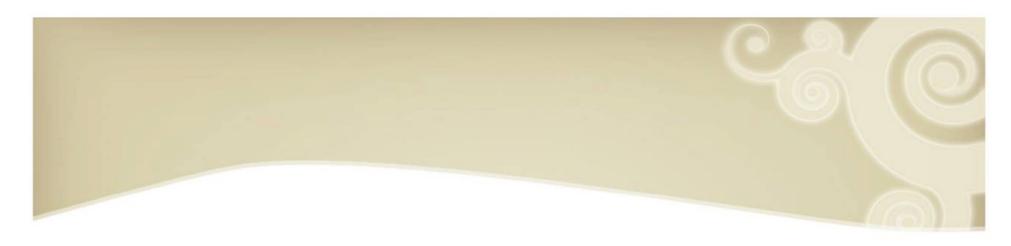
- I. Introductions
- II. History/background on SFVCMHC, Inc. and the Homeless Continuum...Bonnie
  - A. Cornerstone
  - B. Serving homeless individuals for over 30 years
  - C. HUD funded grants
  - D. PATH funding

## **Housing First**

- III. History of Street to Home and Basic Concepts of the Housing First Model...Anita Kaplan
  - A. Research by Dr. Jim O'Connell
    - certain conditions place a homeless individual at a higher risk than others for dying if they remain on the streets
      - 2. Vulnerability Index: survey used to identify individuals how have been homeless the longest and who are the most vulnerable.
  - B. Common Ground: NY Times Square

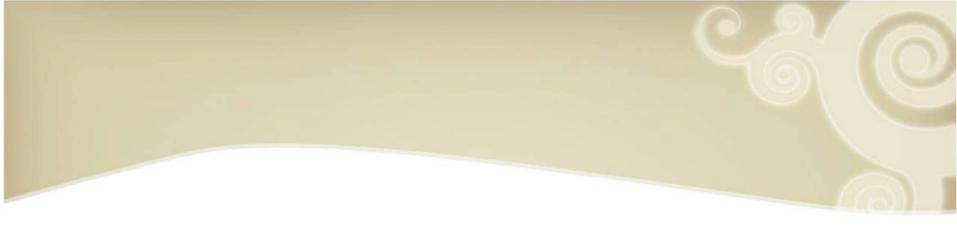
- C. Target population for Street to Home
  - 1. Trimorbid, vulnerable, chronically homeless in Van Nuys area
- D. Goal: "fast track" thirty (30) of the most vulnerable, chronically homeless persons from the streets into permanent supportive housing within one year
- E. Individuals were outreached using the Vulnerability Index and all data was entered into the Common Ground database
- F. High Tolerance/Low Demand
- G. Harm Reduction
- H. No terminations based on non-participation

- IV. Outreach and Engagement....Joseph Robertson
  - A. Target area
  - B. Registry: by-name list of all those sleeping on the streets in the Van Nuys area.
    - 1. Vulnerability Index
    - 2. Over 250 surveys conducted and entered into the database
    - 3. Pictures
  - C. Outreach strategies that work:
    - 1. Building rapport and trust over several face-to-face meetings on the street
    - 2. food cards, vouchers, hygiene kits

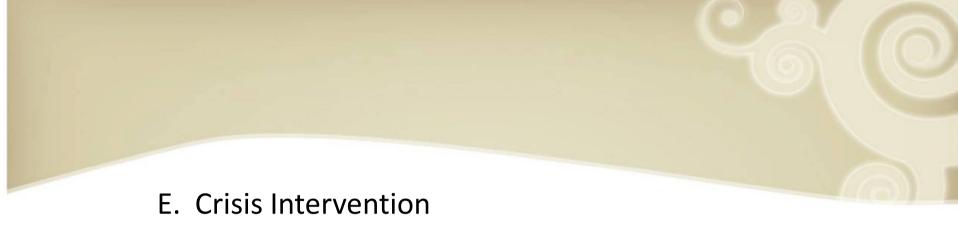


- D. Maintain well-established, mutual and respectful relationships with community providers.
- E. Collaboration with community providers: jail, hospital, local Law Enforcement, mental health providers, churches, parks, health care centers, food banks, etc.

- V. Case Management.....Kimberly Anthony
  - A. Strategies that work
    - 1. Establish Rapport: "Meet the client where they're at"
    - 2. Continued Outreach in the field
    - 3. Confidentiality of their homeless encampments
    - 4. Budgeting funds to have food cards and hygiene packets
      - 5. Case Management in the field ie. completing paperwork in the field
      - 6. Unique strategies to support client's goal
      - 7. Assist with transportation to the program and to appointments in the community



- B. Clients immediately applied for SPC upon enrollment
- C. Clients immediately applied for appropriate benefit entitlements: General Relief, Supplemental Security Income/Medical
- D. Access to milieu services
  - 1. showers, lockers and laundry facilities
  - 2. Clothing, food and transportation
  - 3. Money Management



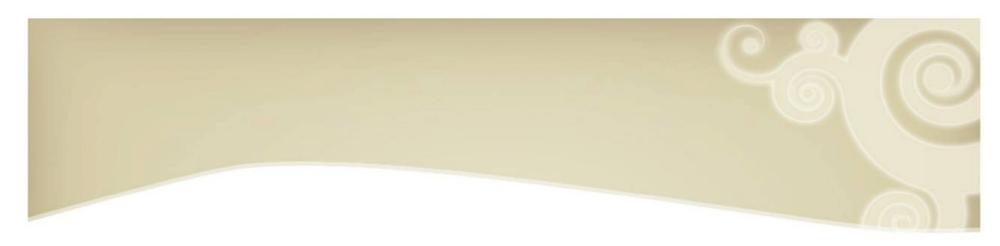
- F. Dual Recovery Services
- G. Support reunification with family members
- H. Linkage to Psychiatric Services, Health Services and Substance Abuse Services
  - I. Advocacy with community providers ie. Homeless Court



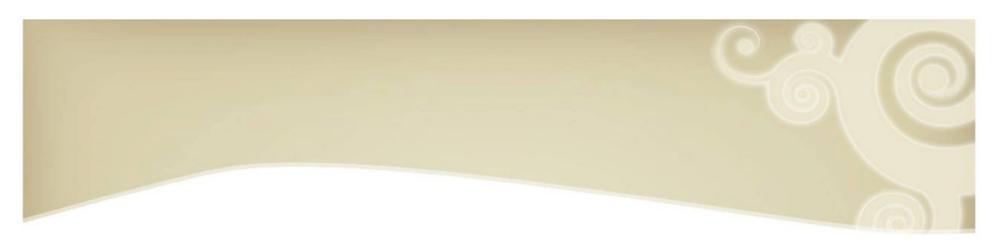
- VI. Transitional Housing as an option.....Gillian Hibbert
  - A. No more than 6 months in transitional housing
  - B. NIMBY
  - C. Benefits of transitional housing
    - 1. learning to live indoors
    - 2. keeps clients engaged in services while securing permanent housing
      - 3. clients build support system with roommates
      - 4. learn life skills
      - 5. establishment of GR and SSI/MCL benefits
      - 6. save a portion of income

- VII. Permanent Supportive Housing.....Gillian Hibbert
  - A. Essential elements of securing SPC housing
    - 1. Building positive working relationships with various community providers such as DMV, SSA, and GR in order to expedite paperwork
      - 2. Collaboration with Housing Authority of the City and County of Los Angeles

- B. Utilizing unique incentives to encourage and motivate clients to remain engaged in the process of applying for SPC
- C. Establishing trust, rapport and follow though with clients
  - 1. Housing Liaison supported the clients in every step of the process of SPC
- D. Assisted client with locating housing in the community



- E. Proactive case management when interfacing with landlords
- F. Monthly Home visits: this is when the "work" begins



- VIII. Outcomes.....Anita Kaplan
  - A. Reduction in homelessness
  - B. Decreased hospitalization and incarceration
  - C. Decrease in use of emergency medical facilities
  - D. Improved mental health care
  - E. Decreased substance use
  - F. Increased social support and peer support
  - G. Number in Permanent supportive housing:



- IX. Lessons Learned.....
  - A. Initial contacts/outreach attempts and establishing strong rapport
  - B. Daily, intensive, field-based case management services
  - C. Individualizing services to client needs
  - D. Intensive field-based case management upon client's move into the Apartment
  - E. Team cohesiveness: daily communication, knowing individual strengths of each team member

